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ABSTRACT

This document presents the standards for social work case management created by the National Association of Social Workers (NASW). Social work case management is defined as "a method of providing services whereby a professional social worker assesses the needs of the client and the client's family, when appropriate, and arranges, coordinates, monitors, evaluates, and advocates for a package of multiple services to meet the specific client's complex needs." The goals of case management are discussed, including the primary goal of optimizing the client's functioning by providing quality services in the most efficient and effective manner to individuals with multiple complex needs. Tasks and functions of the case manager in both client-level and system-level interventions are described. The 10 standards for case management are then presented and interpreted. Standard 1 describes the necessary qualifications of the social work case manager. Standards 2 through 5 pertain to client issues: primacy of the client's interests, self-determination, confidentiality, and client intervention. Standards 6 through 8 pertain to systems issues: system intervention, fiscal accountability and quality assurance, and program evaluation. Standards 9 and 10 return to the initial focus of the social work case manager with a discussion of adequate staffing and interprofessional relationships. The document concludes with a summary of the major principles of the NASW Code of Ethics. (NB)

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NASW standards for social work case management

Prepared by the Case Management Standards Work Group

Approved by the NASW Board of Directors, June 1992

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NASW Standards for Social Work Case Management

The National Association of Social Workers (NASW) Standards for Social Work Case Management are addressed to professional social workers who perform the case management function in the specifically designated role of "case manager." These social work case managers serve as part of social work service or as members of a case management team in human services agencies or other service delivery settings, such as schools, health care facilities, hospitals, and employee assistance programs, or in the context of private practice. These standards are formulated in full recognition that there is no universally accepted definition of case management, nor is there one definitive model of case management as practiced within the social work profession. The purpose of these standards is to clarify the nature of social work case management as well as the role of the social work case manager.

Case management encompasses well-established social work concepts and techniques. As an approach to arranging and coordinating care, it has its origins in the earliest history of social work practice and the social work profession. Social work case management is clearly linked to social casework, a fundamental concept of social work practice. Traditional social caseworkers maintained a dual focus on the client and the environment, working directly with and indirectly on behalf of individual clients and families in need of social services. Case management remains an important professional component of competent social work practice. It is based on the recognition that a trusting and empowering direct relationship between the social worker and the client is essential to expedite the client's use of services along a continuum of care and to restore or maintain the client's independent functioning to the fullest extent possible. This approach to service delivery has become increasingly prominent across many disciplines and practice settings, because it is believed to be an efficient and cost-effective method for managing the delivery of multiple labor-intensive services to targeted populations.

All aspects of social work case management rest on a body of established social work knowledge, technical expertise, and humanistic values that allows for the provision of a specialized and unique service to designated client groups. The social work case manager must have the capacity to provide assistance in a sensitive and supportive manner to particular client populations based on knowledge of human behavior and well-developed observational and communication skills. With this foundation, a social work case manager establishes helping relationships, assesses complex problems,

selects problem-solving interventions, and helps clients to function effectively and, thus, is a therapeutic process.

The conduct of the social work case manager follows the basic social work ethical tenets of the *NASW Code of Ethics*, including the primacy of the client's interests, the recognition of the inherent worth and capacity of the individual, and the individual's right to self-determination and confidentiality. As a social worker, the case manager abides by all NASW professional standards and should be licensed or certified to practice by the state regulatory agency.

Definition

The practice of case management varies greatly across social work settings and is even more diverse as applied by other professionals. Despite this diversity, several elements distinguish *social work case management* from other forms of case management.

***Social work case management* is a method of providing services whereby a professional social worker assesses the needs of the client and the client's family, when appropriate, and arranges, coordinates, monitors, evaluates, and advocates for a package of multiple services to meet the specific client's complex needs.** A professional social worker is the primary provider of social work case management. Distinct from other forms of case management, social work case management addresses both the individual client's biopsychosocial status as well as the state of the social system in which case management operates. Social work case management is both micro and macro in nature: intervention occurs at both the client and system levels. It requires the social worker to develop and maintain a therapeutic relationship with the client, which may include linking the client with systems that provide him or her with needed services, resources, and opportunities. Services provided under the rubric of social work case management practice may be located in a single agency or may be spread across numerous agencies or organizations.

Goals

The primary goal of case management is to optimize client functioning by providing quality services in the most efficient and effective manner to individuals with multiple complex needs. Like all methods of social work practice, case management rests on a foundation of professional training, values, knowledge, theory, and skills used in the service of attaining goals that are established in conjunction with the client and the client's family, when appropriate. Such goals include

- enhancing developmental, problem-solving, and coping capacities of clients
- creating and promoting the effective and humane operation of systems that provide resources and services to people
- linking people with systems that provide them with resources, services, and opportunities
- improving the scope and capacity of the delivery system
- contributing to the development and improvement of social policy.

Tasks and Functions

Although the roles and responsibilities of individual social work case managers can vary considerably depending on program or system objectives, social work case managers perform a range of common tasks related to client-level intervention and system-level intervention.

Client-Level Intervention

Once the social work case manager has identified and engaged clients as a result of outreach or referral activities, he or she conducts a face-to-face comprehensive assessment with each client of that client's strengths and limitations and of the social, financial, and institutional resources available to the client. The social work case manager focuses particularly on how these resources relate to the principal concerns identified during the assessment. On the basis of this assessment, the social worker develops an individualized service plan with the client that identifies priorities, desired outcomes, and the strategies and resources to be used in attaining the outcomes. The responsibilities of the social worker, the client, and others should be clarified throughout development of the plan. The direct contact between social worker and client is essential to effectively accomplish the assessment and service plan development.

Additional social work case management tasks related to client intervention include implementing the service plan aimed at mobilizing the formal and informal resources and the services needed to maximize the client's physical, social, and emotional well-being, and coordinating and monitoring service delivery. The social work case manager also advocates on behalf of the plan for needed client resources and services; periodically reassesses client status, the effectiveness of interventions, and the attainment of outcomes with revision of the service plan as indicated; and terminates the case.

At all stages of client intervention, it is crucial that the social work case manager be granted sufficient authority to access, allocate, monitor, and evaluate service and fiscal resources.

Such authority is a prerequisite of effective case management practice. Optimal control over and management of scarce resources may be more readily achieved in delivery systems structured with a single point of entry and integrated funding. Case managers will be more effective in delivery systems that are designed to reduce fragmentation.

System-Level Intervention

An organization's structure, policies, and budget as well as the community network of services should adequately provide for the implementation of client-centered case management. The social work case manager is responsible for understanding how the agency and environmental systems can both positively and negatively affect clients and to intervene at the system level to optimize these conditions. To this end, the social work case manager engages in a range of tasks that support and enhance the system in which case management exists. For example, the social work case manager

- analyzes the strengths and limitations of environmental systems
- delineates desired outcomes
- selects strategies to improve systems
- assesses the effectiveness of strategies
- continues to revise, as indicated, desired outcomes and strategies.

Specific activities include, but are not limited to, resource development, financial accountability, social action, agency policy formation, data collection, information management, program evaluation, and quality assurance. Like client intervention, system intervention occurs along a continuum and comprises an ongoing, uninterrupted cycle of tasks that are performed by the social work case manager.

Standards for Client, System, and Case Manager

The following 10 standards are generally organized into three areas: the client, the system, and the social work case manager. Beginning with the necessary qualifications of the social work case manager (standard 1), standards 2 through 5 pertain to client issues: primacy of the client's interests, self-determination, confidentiality, and client intervention. Standards 6 through 8 pertain to systems issues: system intervention, fiscal accountability and quality assurance, and program evaluation. Standards 9 and 10 return to the initial focus of the social work case manager with a discussion of adequate staffing and intraprofessional relationships.

Standard 1

The social work case manager shall have a baccalaureate or graduate degree from a social work program accredited by the Council on Social Work Education and shall possess the knowledge, skills, and experience necessary to competently perform case management activities.

Interpretation

The practice of social work case management is highly complex and calls for a variety of roles and skills, such as advocate, broker, diagnostician, planner, community organizer, evaluator, consultant, and therapist. The qualifications of staff should be appropriately matched to the skills required to perform case management duties. Where required by state law, the social work case manager should be licensed or certified to practice.

A differential use of staff may be implemented in carrying out case management responsibilities, particularly when specialized expertise is indicated. The more highly educated, more skilled, and experienced social work case manager (i.e., a social worker with a master of social work [MSW] degree) should conduct the assessment and handle difficult and complex situations. The less highly trained professional (i.e., a social worker with a bachelor of social work [BSW] degree) should perform more routine tasks under supervision. The social worker should accept responsibility or employment only on the basis of existing competence or should agree to participate in the training and supervision required by the employer to acquire the necessary competence.

Professional social work supervision or consultation should be available to all social work case managers, either in the agency or through a contractual arrangement. The beginning baccalaureate social work case manager requires regular consultation or supervision. For the first two years of postbaccalaureate professional experience, at least one hour of supervision should be provided for every 15 hours of direct client-level case management tasks. After the first two years, the ratio may be reduced to a minimum of one hour of case consultation or supervision for every 30 hours of client intervention activities. For the first two years of postgraduate professional experience, one hour of consultation or supervision should be provided for every 30 hours of client intervention activities. The BSW case manager with five years or more of experience or the MSW case manager with two years or more of experience should use consultation or supervision on an as-needed, self-determined basis.

The social worker should strive to become and remain proficient in professional case management practice and in the performance of professional case management functions by critically examining and keeping current with emerging related knowledge. The employing organization should provide regular in-service training as a means of enhancing the skills of the case management staff.

Each social work case manager shall assume personal responsibility for continuing professional education. He or she should complete 90 hours of such education every three years in accordance with the NASW Standards for Continuing Professional Education.

In addition to academic credentials and educational endeavors, it is most important that the social work case manager understand the characteristics of the client population and practice setting in which this population is served; the socioeconomic, cultural, gender, racial, and sexual orientation issues that may affect the differential use of services; the fiscal impact and consequences of using particular services; and the system of agency-community resources and the interrelationships among system components.

Standard 2

The social work case manager shall use his or her professional skills and competence to serve the client whose interests are of primary concern.

Interpretation

As with all social workers, the social work case manager's primary responsibility is to his or her clients. While working within the context of an agency's goals and resources, the case manager must ensure that each client receives appropriate assistance by providing accurate and complete information about the extent and nature of available services and by helping the client decide which services will best meet his or her needs. Personal or professional gains should never be put before the primacy of the clients' interests and the social work case manager must not exploit relationships with clients for such advantages. Furthermore, the case manager should

- ask the advice of colleagues and supervisors whenever such consultation is in the best interests of the client
- exercise professional judgment and prudence in selecting and recommending services
- terminate a service when it is no longer needed by or no longer helpful to the client

- promptly notify the client if the case manager anticipates that a service will be interrupted or terminated by a service provider
- make the necessary transfer or referral if the client still needs such a service to ensure continuity of care.

It may be difficult to adhere to a position of primacy of the client's interests, particularly in a climate of resource scarcity. Agency cost containment goals may conflict with the best interests of the client. When primacy of the client's interest runs counter to agency goals, policies, or resources, and ethical dilemmas are encountered, a mechanism, such as peer review or administratively sponsored ethics committees, should be available to the social work case manager to remedy such conflicts. If no such mechanism exists within the internal operations of the organization, the social work case manager shall advocate for internal change and seek appropriate external consultation with, for example, the NASW Chapter Committee on Inquiry.

Standard 3

The social work case manager shall ensure that clients are involved in all phases of case management practice to the greatest extent possible.

Interpretation

The social work case manager shall make every effort to foster and respect maximum client self-determination. The case manager is responsible for helping clients make informed decisions about selecting services. Many clients must be assisted in negotiating complex, sometimes intimidating, service delivery systems.

Although the lack of organizational or community resources may limit a client's options, the case manager should inform the client of the full range of existing choices. Full disclosure includes information on the lack or limited availability of relevant services and the financial implications of service selections and use.

The involvement of clients in needs identification and in decision making is a basic tenet of practice; only when the client is severely mentally impaired should the client's family or guardian make decisions for the client. When the case manager must act on behalf of a client who has been judged incompetent, he or she should safeguard the interests and rights of the client. When another person has been legally authorized to act on behalf of a client, the case manager should deal with that person by always considering the client's best interests.

Involvement of the client, family, and social worker in case management tasks need not be mutually exclusive. The case manager and the client can share responsibility for certain case management tasks and, thus, maximize client involvement in decision making and problem solving. Sharing case management functions mobilizes the client and the client's family, enables them to use their abilities, and empowers the client by giving the client more control of the services he or she is receiving. However, collaborative decision making should occur to determine the appropriate allocation of tasks. Moreover, the social work case manager must provide support to family members who serve as resources to the client to avoid overburdening them and inadvertently facilitating caregiver burnout.

By the same token, family members who have the time, a personal interest in the client, and an extensive knowledge of and a trusting relationship with the client and with the case manager can be in an advantageous position to schedule, supervise, monitor, adjust, and interpret services. Each client's situation should be weighed on its merits; therefore, the social worker must be flexible in the case management role.

Standard 4

The social work case manager shall ensure the client's right to privacy and ensure appropriate confidentiality when information about the client is released to others.

Interpretation

All information about a client and the client's family that is obtained by the social worker in carrying out case management tasks shall be held in the strictest confidence. Information may be released to other professionals and agencies only with the written permission of the client or his or her guardian. This release shall detail what information is to be disclosed, to whom, and in what time frame.

Certain limits of confidentiality are inherent in service delivery. The case manager should orally restate assurance of confidentiality to the client, including disclaimers and exceptions, if any. State laws may exist that invalidate blanket confidentiality under particular circumstances, such as threats of suicide or harm to others. Court orders may require that an agency or independent practitioner release certain information about a client. These are but two exceptions where society's need to know is pitted against the individual's right to privacy, and may outweigh it. The social work case manager shall seek appropriate consultation before disclosing any information not covered by the client's written release.

Professional discretion should be exercised in releasing only the information that is relevant to the problem at hand and in monitoring the duration of a time-limited consent for release of information.

The social work case manager should interview clients privately and offer them the opportunity to be interviewed alone. It is important to ask clients what information they would and would not like shared with significant others. Out of respect for the client's privacy and need for preparation, the case manager should schedule appointments in advance.

Human services agencies and service delivery settings that provide case management services should develop and disseminate clear policies and guides that cover at least the following:

- what information is to be sought and from whom
- what information is to be recorded and in what form
- who has access to information about cases and under what circumstances
- means for ensuring the accuracy of records or for noting differences
- plans for the retention and disposition of records.

Standard 5

The social work case manager shall intervene at the client level to provide and/or coordinate the delivery of direct services to clients and their families.

Interpretation

Social work case management shall consist of the following eight components in the provision of direct services to clients and their families: (1) outreach, referral, client identification, and engagement; (2) a biopsychosocial assessment of the client; (3) the development of a service plan; (4) implementation of the service plan; (5) coordination and monitoring of service delivery; (6) advocacy on behalf of the client including creating, obtaining, or brokering needed client resources; (7) reassessment of the client's status; and (8) termination of the case when services are no longer warranted.

Outreach, referral, client identification, and engagement. Through outreach, the social worker identifies, accesses, and engages those individuals who would benefit from available services. Having received referrals or having identified people likely to qualify for and need case management, social work case managers screen clients' circumstances and resources to determine eligibility and appropriateness for the case management program.

Biopsychosocial assessment. The social work case manager shall conduct a face-to-face biopsychosocial assessment of the client to identify strengths as well as weaknesses through a systematic evaluation of the client's current level of functioning. To understand the client as a whole person, the social worker must assess the interplay among physical, environmental, behavioral, psychological, economic, and social factors. Areas commonly evaluated by the social work case manager include mental health status; preexisting health or mental health problems; an appraisal of the client's needs and the resources of the client's informal support system, including family members, friends, and organizational memberships; social role functioning; environmental issues, including economic situation, employment status, and other basic needs; and relevant cultural and religious factors. The social work case manager formulates an intervention plan based on the findings of this assessment.

The biopsychosocial assessment includes the input of relevant specialists, including the client's self-assessment of his or her strengths and weaknesses. The participation of other health professionals is essential to the assessment of the client's physical status. Professionals from all the disciplines who are involved in the client's care should contribute to the assessment. Where such joint action is impossible, the social work case manager should gather necessary information and initiate, coordinate, conduct, and document the assessment.

A uniform method of collecting and reporting assessment findings should be developed for use by all case managers in the agency or service system. Such methods are to be used only as tools in making a professional judgment.

Development of the service plan. On the basis of the biopsychosocial assessment, the social work case manager, in concert with the client and his or her family, when appropriate, selects and outlines an array of services and interventions in the form of an individualized service plan. The case manager is responsible for coordinating and documenting the development of the service plan with the client's participation. Ideally, the case manager will have involved professionals from relevant disciplines in the assessment and the development of the service plan; ideally, these professionals will have agreed to assume specific functions and responsibilities.

Two important aspects of the plan are the client's personal and capacity-building goals. Other important factors are the case manager's knowledge of the following: resources, informal and formal linkages with agencies that provide services, the client's use of services, and applicable costs of use, as well as the case manager's selection of alternate resources. The social work case manager should recognize that care planning

is an important resource allocation function and be cognizant of the costs and financing of the particular service plan.

This service plan incorporates the client's expectations and choices and the short- and long-term goals to which the client clearly has agreed. Outcome criteria should be selected that will be used to evaluate whether objectives have been accomplished and goals have been attained. A schedule for reassessing and modifying the initial goals and plans should be part of the initial plan. Whenever possible, the client and/or the family should sign the service plan to indicate agreement with and participation in the development of the plan as well as the expected concomitant behaviors.

Implementation of the service plan. Implementation of the service plan involves arranging for a continuum of services to be provided to the client through formal and informal systems and ensuring that these services both meet the client's needs and are cost effective. The social work case manager selects agencies that clearly meet established standards and expectations for the services they are to provide. The case manager explains his or her role in arranging for the services, describes to the client the services to be provided, informs the client when services are to begin, and promotes those activities that foster client self-sufficiency.

Coordination and monitoring of service delivery. The social work case manager should coordinate service delivery to ensure the continuity and complementarity of the interventions. The case manager should have frequent contact with providers and clients to ensure that services are provided as indicated in the service plan and to ascertain whether such services continue to meet the client's needs. Monitoring the client's receipt of services is an essential element of the ongoing reassessment of client status and the intervention plan. Monitoring permits the case manager to promptly respond to changes in the client's needs and alter the delivery of client services appropriately. It can ensure that sufficient services are being provided and that excessive services are not inhibiting the client and family's ability to meet their own needs. The responsiveness to changes in clients' needs results in the optimal, cost-effective use of service resources. The frequency of monitoring activities varies, depending on the extent of client need and the type of service delivered.

Advocacy for the client and client resources. The case manager may need to advocate for individual clients and their families for them to receive entitlements or obtain needed services, including those provided by the case manager's own agency. The case manager also serves as an advocate to ensure

that services actually are delivered, gaps in service are identified and filled, the individual's needs are recognized, client services are not prematurely terminated, and client services are terminated when appropriate. Data collected during the implementation and monitoring phases of the plan should be used in advocacy on behalf of the client.

Reassessment. The social work case manager will periodically reassess the client's needs and progress in meeting the objectives in accordance with established benchmarks to ensure the effective and timely provision of services. The timing of reassessments shall be prescribed by the program, preestablished by the case manager based on his or her judgment of an appropriate time frame, or performed on an as-needed basis due to situational changes. Reassessments may constitute readministering all or part of the original assessment or a partial reevaluation of the client's most significant problems. Regardless of the timing, reassessments, like monitoring, often provide the social work case manager with new information he or she will use to reformulate the intervention plan and alter the client's service package.

Termination of the case. Termination occurs for a number of reasons, including the client's attainment of stated goals, rehabilitation, client or family noncompliance, the client or the case manager's withdrawal, or the client's death. Termination also may occur because of limited service availability. In such instances, the client should be transferred to another suitable case management program, whenever possible, to ensure continuity of care. Although an agency will set certain criteria for terminating a case, it is the responsibility of the case manager, the client, and significant others to prepare for the effects of termination. The case manager should make appropriate arrangements with the service providers and conclude the financial aspects of the case.

After termination, it may be necessary to follow up on the client and the client's family to ensure that the current situation is adequate and appropriate. Follow-up also may be performed to collect program evaluation measures pertaining to client outcomes. Follow-up may include assessing the adequacy of the client's current living arrangements and the stability of the client's functioning.

Standard 6

The social work case manager shall intervene at the service systems level to support existing case management services and to expand the supply of and improve access to needed services.

Interpretation

The social work case manager is responsible for ensuring that the agency and environmental systems in which case management exists function appropriately on behalf of the client. Case management operates in a complex environment comprising various policies, providers, and service and financial resources. To maximize the effectiveness of this intervention, the social work case manager engages in tasks that support and enhance the system in which case management exists. For example, the case manager develops resources; engages in social action; participates in lobbying/legislative activity; reviews, recommends, and modifies agency policy; collects data; manages information; evaluates programs; and is involved in quality assurance.

Resource development and social action. Because a wide range of social and health care systems must be available to assist high-risk populations and their families, the social work case manager must be able to recognize duplicative services, identify gaps in services, and facilitate the expansion or establishment of services in the agency and in the larger community to meet these needs. Data collected in the assessment, implementation, and monitoring phases of case management practice should provide a database for identifying such resource issues.

Advocacy is often required to ensure that the agency meets its commitment to provide access to and adequacy of services, the services are actually delivered, the needs of the client are recognized, and the client is not prematurely discharged by the service providers. It also is the case manager's responsibility to present agency executives, community leaders, and government and consumer representatives with documented information about resource limitations and other major case management problems, and recommend solutions. The case manager has a responsibility to participate in community needs assessments, community organization, and resource development to see that the needs of clients are identified and understood and that community action—public, private, or voluntary—is initiated to meet particular needs.

Agency policy review and modification. Case management services must be supported by the agency boards and administration through the agency's planning, policy making, staffing, and budgeting processes. The agency's policies on case management should be reviewed and modified periodically. This review should include the service delivery sequences required for client assessment, case management planning and evaluation, referral and follow-up, and shared responsibilities with other agencies or individuals. Effective case

management often requires the establishment of linkages and communication channels with many different social and health care agencies. These must be defined and maintained through joint agreements on policy and reimbursement. Adequate resources and a sufficient number of qualified social work personnel must be allocated by the agency for case management to be successful.

Data collection and information management. Comprehensive data on the case and the program are essential for evaluating the performance of staff and the agency, making administrative decisions, and ensuring the effectiveness of interagency agreements. Information also is needed to identify the client's need for services and for research, accountability to payers or funding sources, and reimbursement purposes. Agency policies should specify the agency's requirements for record keeping, including the length of time case records are retained, the data collection on a program, confidentiality, and other ongoing documentation.

Case records should contain at least the following data to provide a basis for reviewing a case, evaluating the program, and for related purposes:

- written permission to release information, signed by the client
- relevant historical and demographic information on the client, the client's family, and significant others
- results of the initial assessment and periodic reassessments of the client, including data on the client's psychosocial, behavioral, and physical status
- the social work plan and specified goals, interim objectives and time frames, and schedules and procedures for monitoring progress toward accomplishment of goals and objectives
- the outcomes for a client
- referrals to other agencies or resources, including follow-up and feedback from or recommendations by outside agencies or individuals
- cost of the care plan
- reason for termination of services.

The collection and documentation of program-related data should allow for the aggregation of information on issues such as services needed by clients and the availability and accessibility of needed resources, the types of referrals made and the resources used, the types of services actually delivered and the periods during which they were provided, services needed but unavailable, reasons goals were not attained and reasons why services were terminated, types of funding mechanisms, the

total cost of services, the amount and services paid for by clients, and the amount and services paid for by other specified sources. Case documentation and the maintenance of updated, concise records also serve to protect the social work case manager from potential legal problems, as well as provide a basis for service planning.

The degree to which these tasks affect the system is related to the degree of formal authority vested in the case manager role. Although the scope of case manager authority varies across settings, the case manager's influence on system functioning will be greatly enhanced given the discretion to use a broad range of resources. It is the control over the flow of clients, information, services, and funding resources that empowers the case manager and promotes his or her effectiveness in enhancing system functioning.

Standard 7

The social work case manager shall be knowledgeable about resource availability, service costs, and budgetary parameters and be fiscally responsible in carrying out all case management functions and activities.

Interpretation

Case manager as agent of agency. Social work case managers practice with varying levels and types of authority for resource allocation. Expanded financial authority may be readily identified in delivery systems structured with a single point of entry. In many of these settings, social work case management functions as a system "gatekeeper," controlling access and allocating resources. The agency should establish criteria for case managers to determine which clients are entitled to use the scarce resources and under what circumstances.

Client-centered social work case management practice occurs within the parameters imposed by the program and agency. As such, the social work case manager maintains the client focus and simultaneously allocates service resources and provides critical feedback regarding program, agency, and delivery system performance. Thus, the case manager is responsible both for delivering appropriate services to the client and for carefully allocating and managing agency services and financial resources.

Social work case managers must fully disclose the following to clients: the resources that are available and that are unavailable, required copayments and cost sharing, time limits on service provision, timing and frequency of required reassessments, and appropriateness and fiscal effects of treatment choices.

As a gatekeeper and resource allocator, the social work case manager collects information and provides feedback on the fiscal effects on the agency, necessary program modifications, required delivery system changes, quality of provider performance, and effectiveness of the agency's contracting system.

Accounting practices. Distinct from administrative tasks, the time the social work case manager spends with the client and the client's family for assessment, planning, counseling, and monitoring is an integral part of direct service and service costs. Whether the case manager offers case management services privately or as part of the agency program, he or she must carefully account for costs, establish and charge fees for services rendered, and obtain reimbursement for professional services. The agency should establish criteria for case managers to use in determining the proportion of time he or she will spend on particular types of cases in relation to the total caseload. Like other services provided directly to the client for his or her benefit, case management should be appropriately reimbursed through direct program support, third-party payments, fees for service, and other suitable financing mechanisms.

Whenever possible, the social work case manager should encourage the agency to contain a separate line item for case management services to distinguish this direct service system from what previously has been considered strictly an administrative function. This is not to negate the case manager's contribution to administration nor to attribute all the case manager's time to nonadministrative functions. Rather, such budgetary practices will readily identify the costs associated with case management and facilitate appropriate reimbursement of these direct services.

Expanded fiscal accountability may create ethical dilemmas for the social work case manager. Social work case management practice requires the professional to put the client's needs first, as well as to justify how resources are spent on behalf of that client. Attainment of these goals requires that the social work case manager develop and maintain fiscal management skills.

Standard 8

The social work case manager shall participate in evaluative and quality assurance activities designed to monitor the appropriateness and effectiveness of both the service delivery system in which case management operates as well as the case manager's own case management services, and to otherwise ensure full professional accountability.

Interpretation

The accountability of the staff and the agency should be ensured through ongoing quality assurance efforts and periodic evaluation of the appropriateness, adequacy, and effectiveness of both the case management system and of the services provided through this system.

The case manager is involved in evaluating the quality, appropriateness, and effectiveness of the case management services on two levels. At the level of the individual client, the case manager, through completion of data collection forms, record keeping, and participation in peer review, obtains accurate and timely information about each case and the case manager's activities that provide a basis for monitoring, evaluation, and cost-accounting systems. At the delivery system level, achieving program improvements and ensuring the equitable allocation of resources depends on reliable aggregate case data to demonstrate needs and service gaps and to document both the absence and presence of problems. Evaluation and quality assurance ensure that intended outcomes of services are attained and that the services are implemented in a consistent manner according to standards.

The quality, effectiveness, and appropriateness of social work case management services shall be regularly reviewed, evaluated, and ensured using established criteria and standards. Such criteria and standards shall relate to the indicators of need for services and to the effectiveness of required interventions. Contracted providers shall be reviewed and evaluated in the same manner. Appropriate client feedback should be sought on the services they have received and that feedback should be incorporated in this process. The review and evaluation of social work case management services shall be documented and shall include feedback and implementation of corrective measures, when necessary.

Standard 9

The social work case manager shall carry a reasonable caseload that allows the case manager to effectively plan, provide, and evaluate case management tasks related to client and system interventions.

Interpretation

The size of the social work case management staff shall be related to the scope and complexity of the case management system and to the nature of the populations to be served. Staffing shall be sufficient to enable the provision of timely quality services by the social work case manager. The composition of the staff also shall be related to the ethnic and cultural

composition of the client populations to provide for culturally sensitive case management practice and to allow staff to effectively respond to the unique needs of particular client groups. Appropriate and adequate supervision and multidisciplinary consultation services should be available to and used by case management supervisors and staff.

The agency should establish policies and develop systems governing reasonable workloads and caseloads for supervisors and staff. A number of variables affect caseload size. Caseload standards should be based on the scope of professional responsibilities, the volume of clients to be served, the amount of time the case manager needs to spend with clients, the breadth and complexity of client problems or services, and the length and duration of case mix in determining case manager–client involvement. The number of cases a social work case manager can realistically handle is limited to the degree to which caseloads consist of acute, high-risk, multineed clients. Caseload size must realistically allow for meaningful opportunities for face-to-face client contact. As caseload size increases, the case manager has a decreasing capacity to perform ongoing case management activities such as follow-up, monitoring, and reassessment. It is the joint responsibility of the agency and the social work case manager to address and remedy caseload issues and concerns.

Standard 10

The social work case manager shall treat colleagues with courtesy and respect and strive to enhance interprofessional, intraprofessional, and interagency cooperation on behalf of the client.

Interpretation

Case management requires well-coordinated and effective interdisciplinary efforts if the client's needs are to be served. It is important that interpersonal relationships be characterized by a spirit of respect and caring that is critical to the social worker–client relationship. Moreover, the respectful treatment of colleagues is a prerequisite for effective communication and cooperation among professionals from different disciplines.

The social worker often performs case management functions in collaboration with other professionals and agencies. In such cases, it is advisable that the duties be delineated in writing. Formal agency linkage agreements should be established when any two organizations work together to serve the interests of a single client or particular client populations. Such agreements should detail the operational and financial

arrangements of the working relationship as well as confidentiality policies.

When more than one individual will be performing case management tasks, the social work case manager will work with his or her agency, staff, and other relevant professionals to identify a primary case manager. Thus, the client shall have a single, identifiable case manager throughout the continuum of service delivery. Ideally, the client should be able to choose the person who will perform the case management function, and hence, the authority of the social work case manager will be vested by the client. An organization's policies should provide for continuity of responsibilities when the primary case manager is unavailable to provide services to a client.

Code of Ethics

SUMMARY OF MAJOR PRINCIPLES

I. The Social Worker's Conduct and Comportment as a Social Worker

A. *Propriety.* The social worker should maintain high standards of personal conduct in the capacity or identity as social worker.

B. *Competence and Professional Development.* The social worker should strive to become and remain proficient in professional practice and the performance of professional functions.

C. *Service.* The social worker should regard as primary the service obligation of the social work profession.

D. *Integrity.* The social worker should act in accordance with the highest standards of professional integrity.

E. *Scholarship and Research.* The social worker engaged in study and research should be guided by the conventions of scholarly inquiry.

II. The Social Worker's Ethical Responsibility to Clients

F. *Primacy of Clients' Interests.* The social worker's primary responsibility is to clients.

G. *Rights and Prerogatives of Clients.* The social worker should make every effort to foster maximum self-determination on the part of clients.

H. *Confidentiality and Privacy.* The social worker should respect the privacy of clients and hold in confidence all information obtained in the course of professional service.

I. *Fees.* When setting fees, the social worker should ensure that they are fair, reasonable, considerate, and commensurate with the service performed and with due regard for the clients' ability to pay.

III. The Social Worker's Ethical Responsibility to Colleagues

J. *Respect, Fairness, and Courtesy.* The social worker should treat colleagues with respect, courtesy, fairness, and good faith.

K. *Dealing with Colleagues' Clients.* The social worker has the responsibility to relate to the clients of colleagues with full professional consideration.

IV. The Social Worker's Ethical Responsibility to Employers and Employing Organizations

L. *Commitments to Employing Organizations.* The social worker should adhere to commitments made to the employing organizations.

V. The Social Worker's Ethical Responsibility to the Social Work Profession

M. *Maintaining the Integrity of the Profession.* The social worker should uphold and advance the values, ethics, knowledge, and mission of the profession.

N. *Community Service.* The social worker should assist the profession in making social services available to the general public.

O. *Development of Knowledge.* The social worker should take responsibility for identifying, developing, and fully utilizing knowledge for professional practice.

VI. The Social Worker's Ethical Responsibility to Society

P. *Promoting the General Welfare.* The social worker should promote the general welfare of society.

This summary is of the NASW Code of Ethics, effective July 1, 1980, as adopted by the 1979 NASW Delegate Assembly and revised by the 1990 Delegate Assembly. The complete text, including the preamble and expanded definitions of principles, is available on request.

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About NASW

The National Association of Social Workers (NASW) is the largest organization of professional social workers in the world. As of August 1992, over 139,000 members participated in 55 chapters throughout the United States, Puerto Rico, the Virgin Islands, and the international community.

The association works to enhance the professional growth and development of its members, to create and maintain professional standards, and to advance sound social policies. NASW provides a variety of membership benefits including credentials (Academy of Certified Social Workers, Academy of Certified Baccalaureate Social Workers, the Qualified Clinical Social Worker, and the School Social Work Specialist) and insurance (professional liability, health, and life). The NASW Press, which produces *Social Work* and the *NASW News* as membership benefits as well as three other journals and numerous books each year, is a major service in professional development. In January 1991, the association released a major proposal for National Health Care, a single-payer system.

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